
Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Title Line One:: IMBEDDED INTRAMUSCULAR IMPLANTS
Attorney Docket Number:: B0410/7280D1
Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 12
Small Entity:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Richard
Middle Name:: A.
Family Name:: Gambale
City of Residence:: Tyngsboro
State or Province of Residence:: MA
Street of mailing address:: 382 Dunstable Road
City of Mailing Address:: Tyngsboro
State or Province of Mailing Address:: MA
Postal or Zip Code of mailing address:: 01879

Applicant Authority Type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Mike
Middle Name::
Family Name:: Weiser
City of Residence:: Groton
State or Province of Residence:: MA
Street of mailing address:: 516 Martin's Pond Road
City of Mailing Address:: Groton
State or Province of Mailing Address:: MA
Postal or Zip Code of mailing address:: 01450

Applicant Authority Type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Stephen
Middle Name::
Family Name:: Forcucci
City of Residence:: Medford
State or Province of Residence:: MA
Street of mailing address:: 17 Pitcher Avenue
City of Mailing Address:: Medford
State or Province of Mailing Address:: MA
Postal or Zip Code of mailing address:: 02155

Applicant Authority Type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Chirag
Middle Name:: B.
Family Name:: Shah
City of Residence:: Nashua
State or Province of Residence:: NH
Street of mailing address:: 28 New Castle Drive, #11
City of Mailing Address:: Nashua
State or Province of Mailing Address:: NH
Postal or Zip Code of mailing address:: 03050

Correspondence Information

Correspondence Customer No.:: 022832

Representative Information

Representative Customer No.:: 022832

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional of	09/211,332	12/15/1998

Assignee Information

Assignee Name:: C. R. Bard, Inc.
Street of Mailing Address:: 730 Central Avenue
City of Mailing Address:: Murray Hill
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 07974